# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to comple		1 Filer ID (Ethics Commi 00069756		2 Total pages f	iled: 44
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Brooks Freder	ick		Date Received  ELECTRONIC	ALLY FILED
	NICKNAME	LAST Landgraf		SUFFIX	01/16/2024	
4 CANDIDATE /	ADDRESS / PO BOX; APT /	SUITE#; CIT	Y;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	2331 Ladue Lane				Receipt #	Amount
Change of Address	Odessa, TX 79762				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mr.	D. Kirk				
	NICKNAME	 LAST		SUFFIX		
		Edwards				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP.	Γ / SUITE #; CITY	r; ST	ATE; ZIP CODE
TREASURER ADDRESS	5030 E. University Blvd., D	-101				
(Residence or Business)	Odessa, TX 79762					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONI (432) 550-2320	E NUMBER E	EXTENSION			
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after ca	ampaign treasurer riceholder only)
	July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (At	tach C/OH-FR)
9 PERIOD COVERED	Month Day Year 07/01/2023	TH	IROUGH	Month Day 12/31/20		
	01/01/2023			12/31/20	)Z3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year 03/05/2024	X Pr	rimary	Runoff	Other	
	03/03/2024	G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	IT (if known)	
	State Representative Distri	ct 81		State Represer	ntative District 81	
				•		
		GO T	O PAGE 2			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 44

13 C / OH NAME	Landgraf, Brooks Fre	derick (The Honorable)		<b>14</b> Filer ID 00069756	(Ethics Con	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accept These expenditures may ha I officeholders are required t	we been made without t	he candidate's or offic	eholder's kr	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN	TREASURER NAME			
		COMMITTEE CAMPAIGN	TREASURER ADDRES	S		
16 CONTRIBUTION		ZED POLITICAL CONTRIB				
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTR	RIBUTIONS MADE ELEC	CTRONICALLY)	\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUA	ARANTEES OF LOANS	)	\$	102,750.00
EXPENDITURE TOTALS	TURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				\$	5,882.86
	4. TOTAL POLITICAL EXPENDITURES					162,533.99
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAIN RIOD	ITAINED AS OF THE LA	AST DAY OF THE	\$	127,999.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTS TING PERIOD	STANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT			<i>66</i>			
		true and	or affirm, under penalty I correct and includes al itle 15, Election Code.			
			The Honorable	Brooks Frederick L	andgraf	
			Signature of	Candidate or Officeho	lder	
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
		ertify which, witness my hand				
Signature of offi	cer administering	Printed name of office	r administering	Title of office	r administe	ring oath

# **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

			C	OVER SHEET PG 3 3 of 44
	ER NAM	ME Brooks Frederick (The Honorable)	<b>19</b> Filer ID 00069756	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 102,750.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE E: LOANS		\$
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	<b>\$</b> 144,115.65
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		<b>\$</b> 18,418.34
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

	MONEI	ARY POLITICAL CONTRIBU	HONS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete th	nis form.		Total pages Schedule A1: Sch: 1/11 Rpt: 4/44	
2	FILER NAME	ooks Frederick (The Honorable)			Filer ID (Ethics Commission Filers) 00069756	_
4	Date	5 Full name of contributor X out-of-state PAC	(ID#: C00060103 )	_	Amount of Contribution (\$)	_
•	09/28/2023	BP North America Employee PAC	(15#1		\$1,000.00	)
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77079				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date	Full name of contributor	(ID#: )	Τ	Amount of Contribution (\$)	=
	12/15/2023	Barcena, Kim	(		\$1,000.00	)
	Contributor address; City; State; Zip Code			"		
		Odessa, TX 79765				
		pation / Job title (See Instructions)	Employer (See Instructions	ns)		_
	Homemaker		Self			
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	12/07/2023	Barcena, Tyler			\$5,000.00	)
		Contributor address; City; State; Zip Code				
		Odecce TV 7076F				
	Principal occu	Odessa, TX 79765 pation / Job title (See Instructions)	Employer (See Instructions	ns)		_
	Owner		Rival Energy Services	,		
	Date	Full name of contributor out-of-state PAC	(ID#:)	T	Amount of Contribution (\$)	=
	09/05/2023	Charles Butt Public Education PAC			\$10,000.00	)
		Contributor address; City; State; Zip Code		"		
		San Antonio, TX 78209				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)		_
	Date	Full name of contributor  uut-of-state PAC	(ID#:)		Amount of Contribution (\$)	=
	12/07/2023	Clay, Debbie			\$1,000.00	)
		Contributor address; City; State; Zip Code				
		Odessa, TX 79761				
		pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Bonding Ser	vices	Self			_
						_

	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDU	LE <b>A1</b>
	The Instruc	ction Guide explains how to comple	te this for	m.	1	Total pages Schedule A1: Sch: 2/11 Rpt: 5/44	
2	FILER NAME Landgraf, Br	ooks Frederick (The Honorable)			3	Filer ID (Ethics Commission 00069756	ion Filers)
4	Date 07/24/2023	<ul> <li>Full name of contributor  out-of-state  out-of-state</li></ul>	PAC (ID#:	)	7	Amount of Contribution (\$)	\$10,000.00
8	Principal occu Manager	The Woodlands, TX 77382 pation / Job title (See Instructions)	9	Employer (See Instructions Petroleum Wholesale	;)		
	Date 08/24/2023	Cox, James  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
	Principal occu	Odessa, TX 79762 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/15/2023	Full name of contributor out-of-state  Crump, Paul  Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Managing Pa	Odessa, TX 79762-5123 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/07/2023	Full name of contributor out-of-state	PAC (ID#:	)		Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u>		
	Date 07/27/2023	Full name of contributor out-of-state Crutcher, Pam Contributor address; City; State; Zip Code Odessa, TX 79762	PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	()		

	MONEI	ARY POLITICAL CONTRIBUT	ION	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 3/11 Rpt: 6/44	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Landgraf, Br	ooks Frederick (The Honorable)				00069756	
4	Date 09/03/2023	5 Full name of contributor  out-of-state PAC (IDale, Betty		)	7	Amount of Contribution (\$)	\$500.00
		6 Contributor address; City; State; Zip Code					
		Odessa, TX 79761-1224					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	President			Basin Answering Service	е		
	Date	Full name of contributor out-of-state PAC (I	D#:	)	Г	Amount of Contribution (\$)	
	12/06/2023	Edwards, D. Kirk					\$2,500.00
		Contributor address; City; State; Zip Code			1		
		Odessa, TX 79765					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	President			MacLondon Energy			
	Date	Full name of contributor out-of-state PAC (I	D#:	)	Г	Amount of Contribution (\$)	
	12/19/2023	Felker, Gary					\$500.00
	Contributor address; City; State; Zip Code			l			
		,					
		Odessa, TX 79761					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	President			Felker Insurance Service	es,	Inc.	
	Date	Full name of contributor out-of-state PAC (I	D#:	)		Amount of Contribution (\$)	
	12/07/2023	Fisher, Travis					\$500.00
		Contributor address; City; State; Zip Code			l		
		,					
		Odessa, TX 79765					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Owner			Fisher Jewlers			
	Date	Full name of contributor out-of-state PAC (I	D#:	)	Г	Amount of Contribution (\$)	
	10/02/2023	Foley & Lardner LLP Texas Campaign Fund					\$1,500.00
		Contributor address; City; State; Zip Code			1		
		Austin, TX 75201					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				
l							

	MONET	ARY POLITICAL CONTR	RIBUTION	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how to com	plete this for	m.	1	Total pages Schedule A1: Sch: 4/11 Rpt: 7/44	
2	FILER NAME Landgraf, Br	ooks Frederick (The Honorable)			3	Filer ID (Ethics Commission 00069756	on Filers)
4	Date 09/28/2023	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$500.00
_		Athens, TX 75751					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 12/07/2023	Full name of contributor out-of-s  Haner, Gary  Contributor address; City; State; Zip Co		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Odessa, TX 79762 pation / Job title (See Instructions)		Employer (See Instructions	:) 		
			Retired	"			
	Date 12/07/2023	Full name of contributor	state PAC (ID#: de			Amount of Contribution (\$)	\$1,000.00
		Odessa, TX 79761-3527	1				
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 12/07/2023	Hogan, Barbara		)		Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 12/08/2023	Full name of contributor	state PAC (ID#: <u>CO</u>	0236489 )		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			I				

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 5/11 Rpt: 8/44	
2	FILER NAME Landgraf, Br	ooks Frederick (The Honorable)		3	Filer ID (Ethics Commission 00069756	n Filers)
4	Date 12/23/2023	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu Owner	Odessa, TX 79765 pation / Job title (See Instructions)	9 Employer (See Instructions Kirby's Kloset	ıs)		
	Date 12/07/2023	Full name of contributor out-of-state PAC (ID#: Lee, Larry Contributor address; City; State; Zip Code Odessa, TX 79765	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Leeco	ıs)		
	Date 09/28/2023	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78760 pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 12/27/2023	Full name of contributor out-of-state PAC (ID#: Lloyd Gosselink Rochelle & Townsend, P.C.  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 08/08/2023	Full name of contributor x out-of-state PAC (ID#:CI Magellan Midstream Holdings GP, LLC PAC Contributor address; City; State; Zip Code  Tulsa, OK 74121	00397711		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
			processor.			

	MONET	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/11 Rpt: 9/44	
2	FILER NAME		1.3		3	Filer ID (Ethics Commission	on Filers)
	Lanagraf, Br	ooks Frederick (The Honorab				00069756	
4	Date 09/28/2023	5 Full name of contributor  McGuire Woods Federal	x out-of-state PAC (ID#: <u>CC</u> PAC Fund	00225342	7	Amount of Contribution (\$)	\$500.00
		6 Contributor address; City; S	tate; Zip Code				
		Richmond, VA 23219-391	1.6				
8	Principal occu	ipation / Job title (See Instructions	s) 9	Employer (See Instructions	5)		
	Data	Full name of contributor			Г	Amount of Contribution (\$)	
	Date 12/08/2023	Moak Casey PAC	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$500.00
	12/00/2020	Contributor address; City; Si	tate: 7in Code		ł		Ψ300.00
		Contributor address, City, 3	tate, zip code				
		Austin, TX 78746					
	Principal occu	ipation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/07/2023	Moralez, Trinidad					\$500.00
		Contributor address; City; S	tate; Zip Code				
		Odessa, TX 79765					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>L</u> S)		
	Owner	,,,,,	,	La Margarita Restauran			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/08/2023	Oncor Texas State PAC					\$1,500.00
		Contributor address; City; S	tate; Zip Code				
	D: : 1	Dallas, TX 75202-1234	,		Ĺ		
	Principal occu	ipation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
	09/22/2023	PAC of the Independent I	nsurance Agents of Tex				\$250.00
		Contributor address; City; S					
		Austin, TX 78768					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	<u>                                     </u>		
			<u></u>		_		

	MONEI	ARY POLITICAL (	CONTRIBUTIO	N5	SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/44	
2	FILER NAME Landgraf, Br	ooks Frederick (The Honorab	ole)		<b>3</b> Filer ID (Ethics Commissi 00069756	on Filers)
4	Date 10/01/2023	<ul><li>5 Full name of contributor</li><li>Pope, Clay</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:	•	7 Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78703				
8	Principal occu Consultant	pation / Job title (See Instruction:	s)	9 Employer (See Instructions Self Employed		
	Date 12/16/2023	Full name of contributor Pradon, Donald Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code	)	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Odessa, TX 79765 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> 	
	President			Pradon Construction &		
	Date 12/21/2023	Full name of contributor Quiroz, Krista Contributor address; City; S	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$1,000.00
		Odessa, TX 79766	, ,			
	Manager	pation / Job title (See Instructions	s)	Employer (See Instructions LCA		
	Date 12/07/2023	Full name of contributor Sewell, Collin  Contributor address; City; S  Odessa, TX 79762	out-of-state PAC (ID#: tate; Zip Code	)	Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instructions	s)	Employer (See Instructions Sewell Family of Compa		
	Date 12/07/2023	Full name of contributor Sivalls, C. Richard Contributor address; City; S Odessa, TX 79768	out-of-state PAC (ID#:	)	Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instructions	s)	Employer (See Instructions Sivalls, Inc.	; ;	
			,			

	MONET	ARY POLITICAL CONTRIBUTIONS	5	SCHEDULE A1
	The Instru	ction Guide explains how to complete this form.	. 1	Total pages Schedule A1: Sch: 8/11 Rpt: 11/44
2	FILER NAME Landgraf, Br	ooks Frederick (The Honorable)	3	Filer ID (Ethics Commission Filers) 00069756
4	Date 12/07/2023	<ul> <li>Full name of contributor</li></ul>	7	Amount of Contribution (\$) \$1,000.00
_	Duinning Langu	Odessa, TX 79762		
8	Owner	· · · · · · · · · · · · · · · · · · ·	Employer (See Instructions) Plains Enterprises	
	Date 08/11/2023	Full name of contributor out-of-state PAC (ID#: Texans for Lawsuit Reform PAC  Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$25,000.00
	Principal occu	Austin, TX 78701  pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 12/08/2023	Full name of contributor out-of-state PAC (ID#: Texas Chemical Council / Association of Chemical In Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$1,000.00
	Principal occu	Austin, TX 78701  pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 09/28/2023	Full name of contributor out-of-state PAC (ID#: Texas Medical Association PAC  Contributor address; City; State; Zip Code  Austin, TX 78701		Amount of Contribution (\$) \$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 12/08/2023	Full name of contributor out-of-state PAC (ID#: Texas Society of Anesthesiologists PAC  Contributor address; City; State; Zip Code  Austin, TX 78701		Amount of Contribution (\$) \$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/11 Rpt: 12/44	
2	FILER NAME Landgraf, Br	ooks Frederick (The Honorab	le)		3	Filer ID (Ethics Commission 00069756	on Filers)
4	Date 09/28/2023	<ul><li>5 Full name of contributor Texas Trial Lawyers Asso</li><li>6 Contributor address; City; S</li></ul>			7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions	6)	9 Employer (See Instructions	5)		
	Date 08/24/2023	Full name of contributor The Chickasaw Nation Contributor address; City; S	x out-of-state PAC (ID#: Code	C90007923 )		Amount of Contribution (\$)	\$2,500.00
		Ada, OK 74820					
	Principal occu	pation / Job title (See Instructions	8)	Employer (See Instructions	5)		
	Date 08/24/2023	Full name of contributor out-of-state PAC (ID#:)  Union Pacific Corporation Fund for Effective Government  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00	
	Dringing agg	Washington, DC 20005		Employer (See Instructions	<u></u>		
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 07/26/2023	Full name of contributor  Valero PAC  Contributor address; City; S  San Antonio, TX 78269		)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> 5)		
	Date 12/07/2023	Full name of contributor Waddell, Mary Edith Contributor address; City; S Odessa, TX 79761	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$500.00
	Principal occu Rancher	pation / Job title (See Instructions	6)	Employer (See Instructions Self	s)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/11 Rpt: 13/44	
2	FILER NAME Landgraf, Br	ooks Frederick (The Honorab	le)		3	Filer ID (Ethics Commission 00069756	on Filers)
4	Date 12/07/2023	<ul><li>5 Full name of contributor Wagner, Brenda</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Odessa, TX 79762 pation / Job title (See Instructions	)	9 Employer (See Instructions	 		
	Retired			Retired			
	Date 09/14/2023	Full name of contributor Waste Management Emp Contributor address; City; St Washington, DC 20004	····			Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date 09/06/2023	Full name of contributor out-of-state PAC (ID#:)  Watt, Ashley  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77019	,		Ĺ		
	Principal occu Rancher	pation / Job title (See Instructions	)	Employer (See Instructions Antina Cattle Co.	5)		
	Date 09/06/2023	Full name of contributor Watt, Christina Contributor address; City; St Houston, TX 77019	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu Rancher	pation / Job title (See Instructions	)	Employer (See Instructions Antina Cattle Co.	5)		
	Date 07/19/2023	Full name of contributor Weekley, Richard Contributor address; City; St Houston, TX 77055				Amount of Contribution (\$)	\$1,500.00
	Principal occu Owner	pation / Job title (See Instructions	)	Employer (See Instructions Weekley Properties	5)		
			,				

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/44
2	FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4	Date 12/07/2023  5 Full name of contributor out-of-state PAC (ID#:) Wingo Jr., Edward  6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$500
_	Odessa, TX 79762-4403	
8	Principal occupation / Job title (See Instructions)  Retired  9 Employer (See Instructions)  Retired	tions)
	Date Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$) \$1,000
	Odessa, TX 79765  Principal occupation / Job title (See Instructions)  Homemaker  Employer (See Instructions)  Self	tions)

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Advertising Expense Accounting/Banking

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services	Polling Ex se Printing E Salaries/	xpense Expense Wages	e /Contract Labor		Travel in Distr Travel Out of		
	Credit Gard Layment		The Instruction Guide ex	cplains how to co	omple	te this form.				
1	Total pages Schedule F1: Sch: 1/18 Rpt: 15/44	l	E Brooks Frederick (The	Honorable)			3	Filer ID 00069756	(Ethics Commis	sion Filers)
4	Date	<b>5</b> Payee name					<u> </u>			
_	10/27/2023	ADP Austi								
6	Amount (\$)	<b>7</b> Payee addre	ess; City;	State; Zip Co	ode					
	\$345.97		Pac Expressway							
		Austin, TX	18138							
8	PURPOSE OF EXPENDITURE	(a) Category (a) Accounting	See Categories listed at the top o ŋ/Banking	f this schedule)	(b)	<b>=</b>	, TX	officeholder liv		
9	Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Office sou	ıght			Office	held	
	Date	Payee name								
	11/03/2023	ADP Austii	า							
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	ode					
	\$132.77	1405 N Mc	Pac Expressway							
		Austin, TX	78738							
	PURPOSE OF		See Categories listed at the top o	f this schedule)	(b)	Description				
	EXPENDITURE	Accounting	g/Banking			<b>=</b>		of Texas. Co officeholder liv	omplete Schedule T. ing expense	
						Campaign pa				
							,		3 3	
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office sou	<u>l</u> ught			Office	held	
	Date	Payee name	<u>,                                      </u>							
	12/08/2023	ADP Austii								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$132.77	1405 N Mc	Pac Expressway							
		Austin, TX	78738							
	PURPOSE		See Categories listed at the top o	f this schedule)	(b)	Description		_		
	OF EXPENDITURE	Accounting	g/Banking			ш			omplete Schedule T.	
						Campaign pa				
						Jampaign po	~y1C	process	ing ondiges.	
$\vdash$	Complete ONLY if direct	Landidate/∩f	ficeholder name	Office sou	laht			Office	held	
	expenditure to benefit C/O		noonolaer Hame	Onice 300	agrit			Office		
$\vdash$										

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/18 Rpt: 16/44	Landgraf, Brooks Frederick (The Honorable) 00069756
4	Date	5 Payee name
	07/05/2023	AT&T Mobility
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.10	PO Box 536216
		Atlanta, GA 30353
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		COH Cell phone service.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
	08/05/2023	AT&T Mobility
	Amount (\$)	Payee address; City; State; Zip Code
	\$77.00	PO Box 536216
		Atlanta, GA 30353
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		COH Cell phone service.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	09/05/2023	AT&T Mobility
	Amount (\$)	Payee address; City; State; Zip Code
	\$78.50	PO Box 536216
		Atlanta, GA 30353
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  COH Cell phone service.
		CON Cell priorie service.
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a cottogen pet listed choice)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 3/18 Rpt: 17/44	Landgraf, Brooks Frederick (The Honorable) 00069756	
4	Date	5 Payee name	
	10/05/2023	AT&T Mobility	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$78.50	PO Box 536216	
		Atlanta, GA 30353	
8	PURPOSE		_
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		COH Cell phone service.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	_
	11/05/2023	AT&T Mobility	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$84.00	PO Box 536216	
		Atlanta, GA 30353	
H	PURPOSE		_
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		COH Cell phone service.	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	12/05/2023	AT&T Mobility	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$101.50	PO Box 536216	
		Atlanta, GA 30353	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		COH Cell phone service.	
$\vdash$	Complete ONII V if direct	Candidate/Officeholder name Office sought	_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
$\vdash$	•		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/18 Rpt: 18/44	Landgraf, Brooks Frederick (The Honorable) 00069756
4	Date	5 Payee name
	11/18/2023	Ashley Garmon Photography
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$931.25	5307 Bennett Ave
		Austin, TX 78751
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Photography for COH mailers.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	
	Date	Payee name
	08/23/2023	Ector County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	PO Box 14537
		Odessa, TX 79768
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense
		COH donation.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-t
_	Date	Payee name
	11/16/2023	Franklin Creative
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,744.04	558 E. Castle Pines Pkwy
	,	Suite B4, PMB 333
		Castle Pines, CO 78753
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Fundraising mailer.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/18 Rpt: 19/44	Landgraf, Brooks Frederick (The Honorable) 00069756
4	Date	5 Payee name
	12/16/2023	Franklin Creative
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$44,628.41	558 E. Castle Pines Pkwy
		Suite B4, PMB 333
		Castle Pines, CO 78753
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		COH Christmas card.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	12/28/2023	Fuentes, Marco
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,230.88	333 E. Slaughter Lane Apt. 136
		Austin, TX 78744
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract labor for campaign services.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	1
	Date	Payee name
	10/28/2023	Fuentes, Marco
	Amount (\$)	Payee address; City; State; Zip Code
	\$486.33	333 E. Slaughter Lane Apt. 136
		Austin, TX 78744
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Contract labor for campaign services.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees Food/Beverage Expense

Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/18 Rpt: 20/44	Landgraf, Brooks Frederick (The Honorable) 00069756
4	Date	5 Payee name
	08/28/2023	Fuentes, Marco
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$230.88	333 E. Slaughter Lane Apt. 136
		Austin, TX 78744
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract labor for campaign services.
		Sometimes for campaign controls.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	07/28/2023	Fuentes, Marco
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.88	333 E. Slaughter Lane Apt. 136
		Austin, TX 78744
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract labor for campaign services.
		Sometimes for campaign controls.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/28/2023	Fuentes, Marco
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.87	333 E. Slaughter Lane Apt. 136
	Ψ200.01	555 E. Gladytter Lane / Ipt. 155
		Austin, TX 78744
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Contract labor for campaign services.
	0 1 0 0 0 0 0 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

Pense Event Expense Loan Repayment/Reimbur

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services	is Expense	Salaries/V		se s/Contract Labor		OTHER (enter	a category not listed above)	
	Credit Card Payment			The Instruction C	Guide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers	)
	Sch: 7/18 Rpt: 21/44		Landgraf, B	rooks Frederic	k (The Hond	orable)				00069756		
4	Date	5	Payee name									
	09/28/2023		Fuentes, Ma	arco								
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de					
	\$230.83		333 E. Slau	ghter Lane Apt	. 136							
			Austin, TX 7	8744								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE			ges/Contract L		,		<b>=</b>			nplete Schedule T.	
	EXI ENDITORE							_		officeholder livin		
								Contract labo	or ic	or campaigr	i services.	
_	Operation ONLY if allowed	L_				04:	1-4			O#: I-	-1-1	
9	Complete ONLY if direct expenditure to benefit C/O		Januluate/Offic	ceholder name	(	Office sou	gnt			Office h	eiu	
												_
	Date		Payee name	0.1								
	10/30/2023			Odessa Found	ation							
	Amount (\$)		Payee addres		State	e; Zip Co	de					
	\$2,000.00		PO Box 390	8								
			Odessa, TX	79760								
	PURPOSE OF	(a)	Category (Se	e Categories listed at	the top of this sch	nedule)	(b)	Description				
	EXPENDITURE			s/Donations M	,	oittoo		_		de of Texas. Cor officeholder livin	nplete Schedule T.	
			Cariuluale/C	Officeholder/Po	illicai Comii	iiiiee		_			l charity event.	
								•		•	,	
	Complete ONLY if direct		Candidate/Offic	ceholder name	(	Office sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										
	Date	Π	Payee name									_
	12/08/2023		Hiller Printin	g, Inc.								
	Amount (\$)		Payee addres		State	; Zip Co	de					
	\$97.43		800 W Unive	, , , , ,		, ,						
				,								
			Odessa, TX	79764								
	PURPOSE	(a)					(h)	Description				
	OF	اس	Printing Exp	e Categories listed at	tne top of this scr	nedule)	(5)		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		· many Exp	01100				Check if Austin,	, TX,	officeholder livin	g expense	
								COH note ca	rds			
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	(	Office sou	ght			Office h	eld	
	experience to belieff 6/01											

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 8/18 Rpt: 22/44	Landgraf, Brooks Frederick (The Honorable)  00069756
4	Date	5 Payee name
	10/16/2023	House Photography
6	Amount (\$) \$125.00	7 Payee address; City; State; Zip Code PO Box 2910
		A = V = 0=00
		Austin, TX 78768
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Photos for COH purposes.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/30/2023	IRS
	Amount (\$)	Payee address; City; State; Zip Code
	\$845.50	Internal Revenue Service
		Ogden, UT 84201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign federal payroll taxes.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/30/2023	IRS
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,490.44	Internal Revenue Service
		Ogden, UT 84201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign federal payroll taxes.
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee	Gift/Award Legal Serv		Expense		xpens Wages			Travel in Distri Travel Out of I OTHER (enter		oove)
1	Total pages Schedule F1:	ı	ILER NAME							ı	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 9/18 Rpt: 23/44	-	.andgraf, Br	rooks F	rederick (	(The Hond	orable)				00069756		
4	Date	ı	ayee name		_								
L	12/22/2023		Kronda Thin		Campaign								
6	Amount (\$)	1	ayee addres	•	City;	State	e; Zip Co	ode	_ <del>_</del> _				
	\$1,000.00		.301 Justin										
			Suite 201-31	-	.=								
		ļ.,	.ewisville, T										
8	PURPOSE OF		Category (Se				hedule)	(b)	Description	O	do of Torre	mnloto Cabadal T	
	EXPENDITURE		Contribution Candidate/C				nittee				de of Texas. Co officeholder livi	mplete Schedule T. ng expense	
				- 5110	0111	231111			COH contribu				
L													
9	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Offic	ceholder	name	(	Office sou	ıght			Office I	held	
	Date	P	ayee name										
	12/28/2023	L	ancaster, E	3enjami	in_								
	Amount (\$)	P	ayee addres	ss; C	City;	State	e; Zip Co	ode			=		=
	\$3,175.00	1	.9419 Cloud	dy Bay	Drive								
			<b></b>	<b>-</b>	100								
		-	Pflugerville,										
	PURPOSE OF	1	Category (Se				hedule)	(b)	Description  Check if travel (	Unito:	de of Toyon O	mnlete Schodula T	
	EXPENDITURE	<sup>S</sup>	Salaries/Wa	ges/Co	intract La	bor					officeholder livi	mplete Schedule T. ng expense	
									Contract labo				
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offic	ceholder	name		Office sou	ıght			Office I	held	
	Date	P	ayee name										
	08/28/2023	L	ancaster, E	3enjami	in			_		_			
	Amount (\$)	1	ayee addres		City;	State	e; Zip Co	ode					
	\$1,564.46	1	.9419 Cloud	dy Bay	Drive								
		   P	Pflugerville,	TX 786	360								
	PURPOSE	-	Category (Se			a ton of this	Jednjo,	(b)	Description				
	OF EXPENDITURE	1	Salaries/Wa				cault)	,	Check if travel			mplete Schedule T.	
	EAFENDITUKE								Contract labor				
									Contract labo	л IC	л campaig	n services.	
	Complete ONLY if direct		andidate/Offic	:eholdor	name		Office sou	laht			Office I	neld	
	expenditure to benefit C/O		a.aato/OIII	- J. IVIUEI	am	'	J00 3UL	gı 11			Since		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide expl		Vages	/Contract Labor		OTHER (enter a	category not listed al	oove)
1	Total pages Schedule F1:	2 FUEDNAM	<u> </u>				2	Filer ID	(Ethics Commiss	sion Filore)
_	Sch: 10/18 Rpt: 24/44	l	⊏ Brooks Frederick (The H	onorable)			3	00069756	(Ethics Commiss	sion File(s)
1	Date	5 Payee name								
_	07/28/2023									
		Lancaster,								
6	Amount (\$)	7 Payee addre		state; Zip Co	ode					
	\$1,564.46	19419 Clo	udy Bay Drive							
		Pflugerville	e, TX 78660							
8	PURPOSE	(a) Category "	See Categories listed at the top of th	ia aabadula)	(b)	Description				
•	OF		see Categories listed at the top of th ages/Contract Labor	is scriedule)	(~)		outsi	de of Texas. Com	olete Schedule T.	
	EXPENDITURE	Salaries, W	ages/contract East			Check if Austin,	TX,	officeholder living	expense	
						Contract labo	r fo	or campaign	services.	
9	Complete ONLY if direct		ficeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/O	Н								
	Date	Payee name								
	11/28/2023	Lancaster,								
	Amount (\$)	Payee addre		State; Zip Co	nde					
	\$1,750.00	1 1	udy Bay Drive	nate, Zip Oc	uc					
	Φ1,750.00	19419 CIO	duy bay blive							
		Pflugerville	e, TX 78660							
	PURPOSE	(a) Category (	See Categories listed at the top of th	is schedule)	(b)	Description				
	OF EXPENDITURE	Salaries/W	ages/Contract Labor			<b>□</b>		de of Texas. Com		
								officeholder living		
						Contract labo	r tc	or campaign	services.	
	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office sou	ght			Office he	eld	
	experialitate to beliefit 6/01	•								
	Date	Payee name	9							
	10/28/2023	Lancaster,	Benjamin							
	Amount (\$)	Payee addr	ess; City; S	state; Zip Co	de					
	\$1,750.00	19419 Clo	udy Bay Drive							
		Pflugerville	e, TX 78660							
	DUDD 0.05	_			<i>a</i> >					
	PURPOSE OF		See Categories listed at the top of th	is schedule)	(b)	Description	outoi	do of Toyon Com	alota Cabadula T	
	EXPENDITURE	Salaries/W	ages/Contract Labor			_		de of Texas. Comp officeholder living		
						Contract labo				
								, our parg.		
	Complete ONLY if direct	[ Candidate/∩f	ficeholder name	Office sou	l Ight			Office he	ald.	
	expenditure to benefit C/O		nocholaci naille	Onice 300	giit			Office He	,iu	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment  The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 11/18 Rpt: 25/44	Landgraf, Brooks Frederick (The Honorable) 00069756					
4	Date	5 Payee name					
	09/28/2023	Lancaster, Benjamin					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$1,750.00	19419 Cloudy Bay Drive					
		Pflugerville, TX 78660					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
		\[ \times \times \text{Check if Austin, TX, officeholder living expense} \] Contract labor for campaign services.					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
	Date	Payee name					
	12/31/2023	Landgraf, Brooks					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,316.25	2331 Ladue Lane					
		Odessa, TX 79762					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  COH mileage reimbursement					
		for out of dist travel July-Dec (2025 m x \$0.65).					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
	Date	Payee name					
	12/31/2023	Landgraf, Brooks					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$163.80	2331 Ladue Lane					
		Odessa, TX 79762					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  COH mileage reimbursement					
		for travel in district July-Dec (252 m x \$0.65).					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
1							

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to con	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 12/18 Rpt: 26/44	Landgraf, Brooks Frederick (The Honorable)	00069756
4 Date	5 Payee name	
07/30/2023	Odessa Chamber of Commerce	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Coo 700 N Grant Ave	de
	#200 Odessa, TX 79761	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  COH Sponsorship of annual teacher event.
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office soug	ht Office held
Date	Payee name	
09/01/2023	Odessa College Foundation	
Amount (\$)	Payee address; City; State; Zip Coo	le
\$1,500.00	201 W University Blvd	
	Odessa, TX 79764	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Candidate/Officeholder/Political Committee	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  COH Sponsorship of annual scholarship event.
Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office soug	ht Office held
Date	Payee name	
07/28/2023	Poston, Mackenzie	
Amount (\$) \$369.40	Payee address; City; State; Zip Coo 516 E Slaughter Ln #201	de
	Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Contract labor for campaign services.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/18 Rpt: 27/44	Landgraf, Brooks Frederick (The Honorable) 00069756
4	Date	5 Payee name
	08/28/2023	Poston, Mackenzie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$369.40	516 E Slaughter Ln #201
		Austin, TX 78744
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Contract labor for campaign services.
		Contract labor for earlipaign services.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
_	Dete	
	Date	Payee name
	12/28/2023	Poston, Mackenzie
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,369.40	516 E Slaughter Ln #201
		Austin, TX 78744
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Contract labor for compaging continue
		Contract labor for campaign services.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	Date	Payee name
	11/28/2023	Poston, Mackenzie
	Amount (\$)	Payee address; City; State; Zip Code
	\$369.40	516 E Slaughter Ln #201
		Austin, TX 78744
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Contract labor for campaign services.
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/18 Rpt: 28/44	Landgraf, Brooks Frederick (The Honorable) 00069756
4	Date	5 Payee name
	10/28/2023	Poston, Mackenzie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$369.40	516 E Slaughter Ln #201
		Austin, TX 78744
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract labor for campaign services.
		Contract labor for campaign services.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	09/28/2023	Poston, Mackenzie
	Amount (\$)	Payee address; City; State; Zip Code
	\$369.40	516 E Slaughter Ln #201
		Austin, TX 78744
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  Contract labor for campaign services.
		Contract labor for campaign services.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	11/14/2023	Republican Party of Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	1108 Lavaca Suite 500
		Suite 500
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Primary Election Filing Fee.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/18 Rpt: 29/44	Landgraf, Brooks Frederick (The Honorable) 00069756
4	Date	5 Payee name
	08/02/2023	Safe Place of the Permian Basin
6	Amount (\$)	7 Payee address; City; State; Zip Code
•	\$2,500.00	700 N Grant Ave
	4=,000.00	
		Odessa, TX 79762
_	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		COH Sponsorship of annual charity event.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	07/19/2023	Texas Pro Payroll
	Amount (\$)	Payee address; City; State; Zip Code
	\$313.93	2817 John Ben Shepperd #A101
		Odessa, TX 79762
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Campaign payroll processing charges.
	Computate ONLY if diseast	Condidate/Office holder name Office sought Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	D :	
	Date 12/30/2023	Payee name Texas Workforce Commission
	Amount (\$)	Payee address; City; State; Zip Code
	\$785.94	101 E 15th St
		Austin, TX 78778
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Texas unemployment payroll taxes.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
Ļ	<b>T.1</b> 21 11 -		_
1	Total pages Schedule F1:		
	Sch: 16/18 Rpt: 30/44	Landgraf, Brooks Frederick (The Honorable) 00069756	
4	Date	5 Payee name	
	07/06/2023	USAA	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4,226.73	9800 Fredericksburg Road	
	·		
		San Antonio, TX 78288	
_	DUDDOGE		_
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Credit card payment for expenditures reported on	
		Schedule F4.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
9	expenditure to benefit C/OI		
L		T	_
	Date	Payee name	
	08/04/2023	USAA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$6,903.44	9800 Fredericksburg Road	
		San Antonio, TX 78288	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.	
		Credit card payment for expenditures reported an	
		Credit card payment for expenditures reported on Schedule F4.	
	0 1: 0.11.7.7.1.		_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
L	09/05/2023	USAA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14,813.05	9800 Fredericksburg Road	
		San Antonio, TX 78288	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.	
		Credit could be weather a viscosition of the course of the	
		Credit card payment for expenditures reported on Schedule F4.	
			_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefft C/OI	··	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 17/18 Rpt: 31/44	Landgraf, Brooks Frederick (The Honorable)	00069756
4	Date	5 Payee name	
	10/05/2023	USAA	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$9,090.46	9800 Fredericksburg Road	
		San Antonio, TX 78288	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Credit Gard Layment	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		l —	ayment for expenditures reported on
		Schedule F4	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought H	Office held
H	Date	Payee name	
	11/04/2023	USAA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9,199.56	9800 Fredericksburg Road	
	·		
	DUDE CO-	San Antonio, TX 78288	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Cradit Cord Roymont	outside of Texas. Complete Schedule T.
	EXPENDITURE	Credit Gard Layment	n, TX, officeholder living expense
		Credit card p Schedule F4	ayment for expenditures reported on .
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/05/2023	USAA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$17,740.88	9800 Fredericksburg Road	
		San Antonio, TX 78288	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Credit Card Payment Check if travel	outside of Texas. Complete Schedule T.
		,	n, TX, officeholder living expense  ayment for expenditures reported on
		Schedule F4	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	<b>U</b>	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	pense Printing Salaries	Expense   Expense s/Wages/Contract Labor complete this form.	Travel in D Travel Out OTHER (e	
1	Total pages Schedule F1:					3 Filer ID	(Ethics Commission Filers)
L	Sch: 18/18 Rpt: 32/44	Landgraf,	Brooks Frederick (1	The Honorable)		000697	56
4	Date	5 Payee nam					
	08/01/2023	West Texa	as Gifts of Hope				
6	Amount (\$)	<b>7</b> Payee addr		State; Zip (	Code		
	\$1,000.00	PO Box 89	91				
		Odessa, T	X 79760				
8	PURPOSE	(a) Category	(See Categories listed at the t	top of this schedule)	(b) Description		
	OF EXPENDITURE	Contribution	ons/Donations Made	e By	Check if trave		Complete Schedule T.
	EXI ENDITORE	Candidate	/Officeholder/Politic	cal Committee		tin, TX, officeholder	living expense nual charity event.
					COH Spons	sorsiiip or arii	iuai chanty event.
9	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office so	<u> </u> ought	Offic	e held

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/12 Rpt: 33/44 Landgraf, Brooks Frederick (The Honorable) 00069756 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5,075.42 5 Date Payee name 09/03/2023 AT&T Mobility Amount (\$) Payee address; City; State; Zip Code \$200.70 PO Box 536216 Atlanta, GA 30353 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Wifi hotspot service for COH 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 08/01/2023 Adobe Systems Incorporated Amount (\$) Payee address; City; State; Zip Code \$298.27 75 Remittance Dr **Suite 1025** Chicago, IL 60675-1026 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense COH software. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Foodmittee Legal Services Salaries/Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Sch: 2/12 Rpt: 34/44	Landgraf, Brooks Frederick (The Ho	norable)	00069756			
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED T	O A CREDIT CARD	\$ 5,075.42			
5 Date 07/31/2023	6 Payee name Amazon.com					
7 Amount (\$) \$341.21	8 Payee address; City; Sta Box 81226	ate; Zip Code				
	Seattle, WA 98108-1226					
9 TYPE OF EXPENDITURE	X Political	Non-Political				
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense supplies for Office.			
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held			
Date	Payee name					
08/26/2023	Amazon.com					
Amount (\$) \$261.26	Box 81226	ate; Zip Code				
TVDE OF	Seattle, WA 98108-1226	_				
TYPE OF EXPENDITURE	X Political	Non-Political				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense for COH purposes.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held			

### SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Firthing Expense I Committee Legal Services Salaries/Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)			
Sch: 3/12 Rpt: 35/44	Landgraf, Brooks Frederick (The F	Honorable)		00069756				
4 TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED	TO A CREDIT	CARD \$	;	5,075.42			
5 Date	6 Payee name		_					
09/21/2023	Amazon.com							
7 Amount (\$)	8 Payee address; City;	State; Zip Code						
\$437.27	Box 81226							
	Seattle, WA 98108-1226							
9 TYPE OF EXPENDITURE	X Political	Non-Political						
10 PURPOSE	(a) Category (See Categories listed at the top of t	this schedule) (b)	Description					
OF EXPENDITURE	Office Overhead/Rental Expense		<b></b>	side of Texas. Con	•			
LXI ENDITORE			ш	X, officeholder living	- '			
			COH office sup	ipiles and eq	uipment.			
	<u> </u>							
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office h	eld			
Date	Payee name							
09/29/2023	Amazon.com							
Amount (\$) \$215.42	Payee address; City; Box 81226  Seattle, WA 98108-1226	State; Zip Code						
TYPE OF EXPENDITURE	X Political	Non-Political						
PURPOSE	(a) Category (See Categories listed at the top of t	this schedule) (b)	Description					
OF EXPENDITURE	Office Overhead/Rental Expense		$\Box$	side of Texas. Con	•			
LXI ENDITORE			Check if Austin, T					
			Officeholder su	pplies for Ca	pitol office.			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office h	eld			

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	nt Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
	The Instruction Guide explains how to complete this form.							
Total pages Schedule F4: Sch: 4/12 Rpt: 36/44	2 FILER NAME Landgraf, Brooks Frederick (The Ho	onorable)	3 Filer ID (Ethics Commission Filers) 00069756					
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED 1	TO A CREDIT CARD	\$ 5,075.42					
5 Date 10/08/2023	6 Payee name Amazon.com		1					
7 Amount (\$) \$408.43	Box 81226	ate; Zip Code						
9 TYPE OF	Seattle, WA 98108-1226	Non-Political						
EXPENDITURE								
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if tra	evel outside of Texas. Complete Schedule T. Sistin, TX, officeholder living expense er equipment and supplies.					
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held					
Date	Payee name							
11/08/2023	Amazon.com							
Amount (\$) \$322.70	Payee address; City; Sta Box 81226 Seattle, WA 98108-1226	ate; Zip Code						
TYPE OF EXPENDITURE	X Political	Non-Political						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	Check if tra	ovel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held					

### SCHEDULE F4

Advertising Expense

Event Expense

**EXPENDITURE CATEGORIES FOR BOX 10(a)** 

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	emorials Expense Printing Expense			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
			The Instruction Guide ex	plains how to c	complete this form.				
1	Total pages Schedule F4:	2 FILER NAM	E			3	Filer ID	(Ethics Commission Filers)	
	Sch: 5/12 Rpt: 37/44	Landgraf, E	Brooks Frederick (The	Honorable)			00069756		
4	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD					\$		5,075.42	
5	Date 12/02/2023	6 Payee name Amazon.co							
ļ_	Amount (\$)	8 Payee addre		State; Zip C	`ode				
ľ	\$156.69	Box 81226	•	otate, zip o	, out				
		Seattle, W	A 98108-1226						
9	TYPE OF EXPENDITURE	X	Political	Non-Po	blitical				
10		(a) Category (s	See Categories listed at the top of	this schedule)	(b) Description				
	OF EXPENDITURE	Office Ove	rhead/Rental Expense		1 <u></u>		de of Texas. Compl		
					COH gift wra		officeholder living on supplies	expense	
					J SST gill Will	.pp	ng cappiloo.		
11	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	pught		Office hel	d	
	Date	Payee name	;						
	12/16/2023	Amazon.co	om						
	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code				
	\$251.47	Box 81226							
		Seattle, W	A 98108-1226						
	TYPE OF EXPENDITURE	X	Political	Non-Po	olitical				
	PURPOSE	(a) Category (s	See Categories listed at the top of	this schedule)	(b) Description				
	OF EXPENDITURE	Office Ove	rhead/Rental Expense		<u> -</u>		de of Texas. Compl		
	_//		<b></b>		<b>-</b>	heck if Austin, TX, officeholder living expense			
					COH tech ite	:1115.			
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	 ought		Office hel	d	
l									

### SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Committee Legal Services Salaries/Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F4: Sch: 6/12 Rpt: 38/44	2 FILER NAME Landgraf, Brooks Frederick (The Ho	3 Filer ID 00069756	(Ethics Commission Filers)			
4 TOTAL OF UNITEMIZ	TAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5,075.42					
5 Date 11/16/2023	6 Payee name Apple Store Domain Northside					
7 Amount (\$) \$1,837.00	8 Payee address; City; State; Zip Code					
	Austin, TX 79758					
9 TYPE OF EXPENDITURE	X Political	Non-Political				
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense COH technology.					
11 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sought	Office he	eld		
Date 07/08/2023	Payee name Armic Systems					
Amount (\$) \$300.00	P.O. Box 12902	ate; Zip Code				
	Odessa, TX 79761					
TYPE OF EXPENDITURE	X Political	Non-Political  (b) Description				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Advertising Expense	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense tisement design.				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office he	eld		

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/12 Rpt: 39/44 Landgraf, Brooks Frederick (The Honorable) 00069756 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5,075.42 5 Date Payee name 11/30/2023 Capitol Extension Gift Shop Amount (\$) Payee address; State; Zip Code 1400 N Congress Ave \$2,989.50 E1.006 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense COH Holiday gifts for supporters. 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 12/18/2023 Capitol Extension Gift Shop Payee address: Amount (\$) City; State; Zip Code \$1,731.96 1400 N Congress Ave E1.006 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense COH Christmas gifts for supporters. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F4

Event Expense Fees		Transportation Equipment & Related Expense
y - Gift/Awards/Memorials Expense	Printing Expense	Travel in District Travel Out of District OTHER (enter a category not listed above)
<b>v</b>		OTHER (effer a category flot listed above)
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	onorable)	00069756
ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$ 5,075.42
6 Payee name Double Tree Hotel		
1617 N Interstate 35 Frontage Rd	tate; Zip Code	
X Political	Non-Political	
(a) Category (See Categories listed at the top of the Travel Out of District	Check if trav	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
	Officeholde	er lodging for special session.
Candidate/Officeholder name H	Office sought	Office held
Payee name		
Double Tree Hotel		
1 '	tate; Zip Code	
Austin, TX 78702		
	Non-Political	
Austin, TX 78702	is schedule) (b) Description Check if trat X Check if Au	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense er lodging for special session.
Austin, TX 78702  X Political  (a) Category (See Categories listed at the top of the	is schedule) (b) Description Check if trat X Check if Au	stin, TX, officeholder living expense
	Fees Food/Beverage Expense Gitl/Awards/Memorials Expense Legal Services  The Instruction Guide expl.  2 FILER NAME Landgraf, Brooks Frederick (The H  ZED EXPENDITURES CHARGED  6 Payee name Double Tree Hotel  8 Payee address; City; S 1617 N Interstate 35 Frontage Rd  Austin, TX 78702  X Political  (a) Category (See Categories listed at the top of th Travel Out of District  Candidate/Officeholder name  H  Payee name Double Tree Hotel	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Printing Expense Polling Expense Printing Expense Printing Expense Printing Expense Printing Expense Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.  2 FILER NAME Landgraf, Brooks Frederick (The Honorable)  ZED EXPENDITURES CHARGED TO A CREDIT CARD  6 Payee name Double Tree Hotel  8 Payee address; City; State; Zip Code  1617 N Interstate 35 Frontage Rd  Austin, TX 78702  X Political Non-Political  (a) Category (See Categories listed at the top of this schedule) Check if tratix Check if Austin Candidate/Officeholder name  Candidate/Officeholder name Double Tree Hotel  Payee name Double Tree Hotel  Payee address; City; State; Zip Code

### SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expense Legal Services	Loan Repay Office Over Polling Exp Printing Exp	/ment/Reimbursement head/Rental Expense ense		Transportation E Travel in District Travel Out of Di	
	The Instruction Guide exp	plains how to con	plete this form.			
1 Total pages Schedule F4:				3	Filer ID	(Ethics Commission Filers)
Sch: 9/12 Rpt: 41/44	Landgraf, Brooks Frederick (The	Honorable)			00069756	
TOTAL OF UNITEMI	ZED EXPENDITURES CHARGED	TO A CREE	OIT CARD	\$		5,075.42
5 Date	6 Payee name					
10/10/2023	Double Tree Hotel					
7 Amount (\$)	1 ' ' '	State; Zip Cod	le			
\$215.28	1617 N Interstate 35 Frontage Rd					
	Austin, TX 78702					
9 TYPE OF EXPENDITURE	X Political	Non-Politi	cal			
10 PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description			
OF EXPENDITURE	Travel Out of District					plete Schedule T.
			X Check if Austin			
			Officeriolider	lou	ging for spe	ciai session.
11 Complete ONLY if direct	Candidate/Officeholder name	Office soug	ht		Office h	eld
expenditure to benefit C/O		omee soug			Omoc n	
Date	Payee name					
11/02/2023	Double Tree Hotel					
Amount (\$) Payee address; City; State; Zip Code \$399.92 1617 N Interstate 35 Frontage Rd  Austin, TX 78702						
TYPE OF EXPENDITURE	X Political	Non-Politi	cal			
PURPOSE	(a) Category (See Categories listed at the top of	this schedule)	(b) Description			
OF EXPENDITURE	Travel Out of District					plete Schedule T.
EXILENDITORE			Check if Austin			
			Officeholder	lou	ging for spe	ciai session.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office soug	ht		Office h	eld

# SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	· · · · · · · · · · · · · · · · · · ·		3 Filer ID (Ethics Commission Filers)
Sch: 10/12 Rpt: 42/44	Landgraf, Brooks Frederick (The Hono	00069756	
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO	A CREDIT CARD	\$ 5,075.42
5 Date 11/08/2023	6 Payee name Double Tree Hotel		
7 Amount (\$) \$216.89	8 Payee address; City; State 1617 N Interstate 35 Frontage Rd	e; Zip Code	
	Austin, TX 78702		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Travel Out of District	Check if travel  X Check if Austir	outside of Texas. Complete Schedule T. n, TX, officeholder living expense lodging for special session.
11 Complete ONLY if direct expenditure to benefit C/Oh		Office sought	Office held
Date	Payee name		
11/12/2023	Double Tree Hotel		
Amount (\$) \$430.56	Payee address; City; State 1617 N Interstate 35 Frontage Rd	e; Zip Code	
	Austin, TX 78702		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Travel Out of District	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense lodging for special session.
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Office sought	Office held

### SCHEDULE F4

Advertising Expense Accounting/Banking	Fees	pan Repayment/Reimbursement ffice Overhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Consulting Expense Contributions/ Donations Made By	/ - Gift/Awards/Memorials Expense P	olling Expense rinting Expense	Travel in District Travel Out of District
Candidate/Officeholder/Politica	Il Committee Legal Services S  The Instruction Guide explains hor	alaries/Wages/Contract Labor	OTHER (enter a category not listed above)
1 Total pages Schedule F4:	•	To complete the form	3 Filer ID (Ethics Commission Filers)
Sch: 11/12 Rpt: 43/44	Landgraf, Brooks Frederick (The Honoral	ole)	00069756
4	ZED EXPENDITURES CHARGED TO A		\$ 5,075.42
5 Date	6 Payee name		
11/17/2023	Double Tree Hotel		
7 Amount (\$)	8 Payee address; City; State; 2	Zip Code	
\$215.28	1617 N Interstate 35 Frontage Rd		
	Austin, TX 78702		
9 TYPE OF EXPENDITURE	X Political No	on-Political	
10 PURPOSE OF	(a) Category (See Categories listed at the top of this schedu		
EXPENDITURE	Travel Out of District	, <u>u</u>	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
			lodging for special session.
<b>11</b> Complete ONLY if direct expenditure to benefit C/O		ce sought	Office held
Date 12/02/2023	Payee name Double Tree Hotel		
Amount (\$)		Zip Code	
\$184.28	1617 N Interstate 35 Frontage Rd	ip code	
,			
	Austin, TX 78702		
TYPE OF EXPENDITURE	X Political No	on-Political	
PURPOSE	(a) Category (See Categories listed at the top of this schedu	le) <b>(b)</b> Description	
OF EXPENDITURE	Travel Out of District	. <u> </u>	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
			lodging for special session.
		- Ciniconolidor	roughing for opeolar occoroni
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ce sought	Office held

### SCHEDULE F4

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overhe Polling Exper Printing Expe Salaries/Wag	nse es/Contract Labor	Transportation Travel in Distric Travel Out of D	
1 Total pages Schedule F4:		pianis now to comp	Tete this form.	3 Filer ID	(Ethics Commission Filers)
Sch: 12/12 Rpt: 44/44	Landgraf, Brooks Frederick (The	Honorable)		00069756	(Lance Commission Filers)
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGEI	TO A CRED	T CARD	\$	5,075.42
5 Date 07/22/2023	6 Payee name La Boutique Excentrinque				
7 Amount (\$) \$735.67	8 Payee address; City; 4060 Faudree Rd Ste. 107	State; Zip Code			
	Odessa, TX 79765				
9 TYPE OF EXPENDITURE	X Political	Non-Politic	al		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Gift/Awards/Memorials Expense	this schedule) (b	Check if Austin,	outside of Texas. Cor , TX, officeholder livir ulations gifts f	ng expense
11 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	t	Office h	neld
Date	Payee name				
09/14/2023	Monahans News				
Amount (\$) \$380.00	Payee address; City; 107 W. 2nd St Monahans, TX 79756	State; Zip Code			
TYPE OF EXPENDITURE	X Political	Non-Politic	 al		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Advertising Expense	this schedule) (b	Check if Austin,	outside of Texas. Cor TX, officeholder livir in newspaper	ng expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	t	Office h	neld